JMMER PREVENTORIUM NUMBER

Bulletin

OF THE

National Tuberculosis Association

Vol. VIII MARCH, 1922 No. 3

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Kiddy Camps in California

By Mrs. Edythe L. M. Tate-Thompson

Executive Secretary California Tuberculosis Association

In California the Kiddie Kamp in the larger counties is part of the tuberculosis program. But watching an experiment in the conducting of some of the Kiddie Kamps, I have grown sceptical of some of the benefits. A tuberculosis association that conducts a camp with children either from the clinics or from homes where there is a case of tuberculosis, should use far more judgment in the selecton of the type of child going to the Camp than they use in dealing with the adult sick.

Perhaps the National Association would do well to contribute certain regulations with reference to camps where Seal Sale funds are used to support it. We all know that a social worker or a nurse who doesn't look out for "her families or patient" isn't worth having if she doesn't put Johnnie down on her list durng the winter as the very child who must go to camp, because Johnnie has been out of school on account of sickness during the winter and he needs a change. Out here mention is made so often that "the camp gave Johnnie such a boost." Undoubtedly, but two things stand out so clearly as a result of watching some Camp experiments that I pass them on for what they are worth.

First, the association operating the camp should decide on two important things. The type of child selected is most important. Nearly all states now have camps run by other organizations and a child who simply needs a vacation or a change, I do not think belongs in a camp run by a tuberculosis association. The average playground director who is used to dealing with well children too often places more value on exercise, either hiking or swimming, than he does on rest, and the result is that at the end of summer you do not have the results that are important in helping a child gain or increasing his resistance.

It would seem, since in California we have had an opportunity to compare the results, that the local associations who have had a careful physical examination made with a complete social and medical history of the child and the necessary medical work attended to, such as the removal of tonsils and adenoids, with dental work corrected, have made far better progress with more lasting results than other associations who have not been either particular about the correction of defects, or the type of child.

This year we shall ask the Associations who wish to care for both groups to take them separately, taking the children who need a change and who are able to take exercise, swimming and folk dancing, the first six weeks, then after that to take the group who are definitely underweight enough to put them in the preventorium group and conduct the camp on preventorium lines, changing the diet, emphasizing rest, limiting the exercise to some light marching, using the story hour as a means of entertainment; rather than to run a camp with two groups of children and in the end defeating the very purpose for which the camp was established.

I realize how difficult it is to draw these lines of distinction, but I realize the criticism that can come to an association that confuses these two groups. Some of our associations take both boys and girls in their camps, but it is a great responsibility, and unless there is close supervision, it seems unwise.

Follow-up work after the camp closes is as necessary as the visit before the child goes to camp. Personal hygiene should not be neglected, and visitors to most camps, unless on business, should be discouraged. Two of our camps one year had scarlet fever brought to them from contact with visitors. I know of one association whose seal sale has been greatly benefited by the way its camp was run, and I know of another association who perhaps may never regain its standing on account of the poor way their camp was run.

Cost of construction varies so in different parts of the country, and types of buildings must necessarily be different if both boys and girls are cared for at the same time. Dormitories 80 by 18 feet, divided into four sections, can easily hold six cots each. A nurse or attendant's room should be near to keep the children under supervision. The wash trough is more practical than lavatories. Places for drinking cups and towels should be provided. Dressing rooms, lockers and toilets should be provided in the passage way between the dormitories. Shower baths are preferable to bath tubs, but there should be one bath tub at least.

The school nurses, the tuberculosis clinic and the school principals are always able to select the children who should report at the tuberculosis clinic for examination. Records must be kept at the camp, weights must be taken, heads must be bobbed and shampooed before the trip is taken.

The day's order starts in some camps with a whistle or bell at seven. The children, if they are small, will need help in getting dressed. At 7:15, light setting-up exercise for ten minutes, and then the salute to the flag and breakfast at eight o'clock. In one camp the little voices chanting their grace at each meal preserved discipline at the table, and after breakfast each child was assigned some piece of work; there was inspection of the beds and dormitories, baths, etc., hands were scrubbed and then recreation began.

A camp day is as full as a soldier's day. Milk is given in the morning, and it is noon before one knows it. Immediately after dinner, every child should undress and be kept in bed at least from one and a half to two hours, then there are shower baths, recreation, and in some camps the children had occupational therapy and did very well with it.

Story hour must always close a day at camp. Fairies still live in trees, and opportunities for health stories offer themselves. "The most wonderful house in the world" is full of lovely stories for both boys and girls.

It is ideal if a physician can call once a week, as it lessens responsibility for those in charge and a wonderful chance comes to establish health habits, and to learn to like so many things that a child will not eat at home if presented in the right way. But best of all, with this group of children there comes to all the friends of these little people the consciousness of how easily childhood can be cheated of the priceless gift of health, or the consciousness that unless the tuberculosis association keeps its

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BULLETIN
OF THE
National Tuberculosis Association
Published Monthly
in the interest of workers engaged in the Anti-Tuberculosis Movement by the
National Tuberculosis Association
370 SEVENTH AVENUE, NEW YORK CITY

Vol. VIII. March, 1922 No. 3

Entered as second class mail matter, October 21, 1914, at the Postoffice at New York, N. Y., under the Act of August 24, 1912.

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Kiddy Camps in California

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eye on Johnnie, the strain of adolescence will be too much for him.

For propaganda there is nothing to equal the Kiddie Kamp. I only dare breathe very confidentially what happened during the last Seal Sale. An enterprising executive secretary who runs a very wonderful camp in the state, secured permission from the powers-that-be to take some of her Kamp Kiddies just for a few minutes to a prize fight to sing a few songs they had learned at the Camp. She thought it might boost the Seal Sale, and that she would pass a few pie tins through the crowd and get a few dollars. She got the money alright, only she said she would never go through it again. The crowd after the first song pelted her with money. Her pie tins overflowed. They used hats, pans from a bakery, everything to hold the five hundred dollars that was thrown in small change at her and the children. She had so much money she couldn't carry it, and when she told me about it, I laughed until I cried at her confusion, for she had not recovered. She was disappointed that I did not share her chagrin, and then I matched her with another story and reminded her that if anything can take off the curse of prize-fighting in this or any other country, it is when well men can forget the brutality of such entertainment and turn their attention to another kind of fight—when for the moment the misery of little children fighting for their health, fighting the great Captain of the Men of Death, makes them turn their hearts and purses open to a greater, better cause.

The Cayuga Preventorium

By Luzerne Coville

President Ithaca Tuberculosis Association, Ithaca, New York

A bit of friendly encouragement coupled with a very little pressure bids us speak for the undernourished tuberculous child and its care, and incidentally thereto of the Cayuga Preventorium.

Briefly, our tuberculosis work in Tompkins County is this. Our county population is 36,000; one-half of whom live in Ithaca, the county seat, geographically situated at the county center. Our dispensary and clinic, at the public welfare building, began in a very humble way in 1911, whereas now we have annually about a thousand dispensary calls, and over 1,000 home visits. The county tuberculosis hospital or sanatorium established in 1913 now has 28 beds, and is usually full. Our deaths average 20 per year. The bulk of this tuberculosis work, and all of our children pass through our dispensary, with a full-time nurse in charge; with its two afternoon clinics weekly, and its regular clinician in charge. This clinic and allied work functions through the Ithaca Tuberculosis Association, whose budget averages now about $5,000 per year.

As a result of our clinic we found years ago many children of tuberculous parentage who themselves were not yet tuberculous; many, moreover, who were undernourished. During the three months' summer vacation we almost lost our hold upon these youngsters to find them turning up in the fall with coughs, colds, adenoids and tonsils. For three seasons a summer camp was maintained, with attendant cook and nurse in charge. The gains were most satisfactory and the fall slumps much fewer. And these youngsters took back into their homes their lessons of simple hygiene. The formerly closed houses were arranged into outdoor sleeping-porches, or the windows muslined with the panes taken out.

The Building

The Preventorium was built in 1914-15 upon four acres of open drained meadow, at a total equipped cost of about $10,000. The annual cost of two months' summer camp now is about $1,500. The building is situated three miles from Ithaca, within easy reach by macadam road and trolley, upon high ground overlooking the head of Cayuga Lake. It comprises a simple building with baths and dressing-rooms for boys and girls, kitchen, and an ample dining-hall and occupation room. This is surrounded upon three sides by a 10-foot wide porch. This porch is furnished with heavy rolled-up Neapolitan awnings arranged so as to button tight and be lashed down to the floor in case of storm. Here the kiddies live night and day, and love it; in sunshine, wind and storm, aside only from their outdoor play and recreation. Upon the second floor are rooms for the staff. The half-beds have now given way to iron cots with spiral springs, cotton mattresses, flannel blankets, and noiseless castors. In front is a complete school playground equipment; a small stream capable of transforming itself into a pond with sluices and an overshot wheel; or degenerating into a home and harbor for pet ducks. The field also furnishes a covered sand-box, a place for games of all sorts, for tents and huts. The nearby woods furnish play for excursions, for tramps and scouting, perhaps an evening supper. The grounds have been planted to shrubs and roses, and fruit trees. Gardening has also been tried but without much success. Border plants have been brought in from the fields and woods and serve a temporary purpose. The ideal preventorium possibly would be a farm with a good-natured indulgent farmer; with team, crops, dairy, chickens, ducks and in fact all farm animals; and an all-year service at least for some of these children.

Management

Our routine of management consists of a matron and an assistant; a cook and a helper. Temperatures are taken morning and evening; weights each week; two rest periods daily, two lunches, three simple meals, a bath, flag-raising with song and sunset lowering and the pledge of allegiance. A piano, phonograph, doll-

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Calendar for Annual Meeting of National Association

Washington, D. C., May 4th to 6th, 1922

NOTE—*All meetings will be held at the First Congregational Church, corner of Tenth and G Streets, N.W.*

Thursday, May 4th

9:30 Opening general meeting. Greeting, Hon. Calvin Coolidge, Vice-President of the United States; address of the President; report of the executive office; general business and nomination of directors.
11:00 Clinical Section.
11:00 Sociological Section.
2:30 Pathological Section.
2:30 Nursing Section.
8:15 Advisory Council.

Friday, May 5th

9:30 Pathological Section.
9:30 Nursing Section.
12:45 Modern Health Crusade luncheon.
2:30 Clinical Section.
2:30 Sociological Section.
4:00 Meeting of Board of Directors.
5:00 Automobile ride through Washington parks.
7:00 Dinner National Conference of Tuberculosis Secretaries.

Saturday, May 6th

9:30 Clinical Section.
9:30 Sociological Section.
12:30 Reception at White House by President Harding.
2:30 Joint Pathological and Clinical Section.

NOTE—This outline is tentative and is subject to change. Final program will be printed about ten days before the meeting. A more complete preliminary program giving titles and authors of papers will be published in the April BULLETIN.

Hotels in Washington

The National Association will not have definite hotel headquarters for the Washington Annual Meeting, as all the meetings will be held in the First Congregational Church. The following suggested list of hotels is recommended to members. The distance from the Church, where the meetings will be held, is indicated in blocks. Rates are not quoted for the New Willard Hotel, since the management could not promise any space until after May 4th. Several other hotels have made reservations for members of the Triennial Congress of Physicians and Surgeons up to and including May 4th. Members of the National Tuberculosis Association are urged to make their hotel reservations early on this account.

Hotels	Single Rooms With Bath	Without Bath	Double Rooms With Bath	Without Bath	Distance from Meeting Place
The Washington, 15th and Pennsylvania Ave.	$5–7*	$8.00*	$10–12* (*twin beds*)	.....	6 blocks
The Raleigh, 12th and Pennsylvania Ave.	$4-7	$3–5	$5–10	$4–6	5 blocks
The Powhattan, Pennsylvania Ave., 18th and H St., N.W.	$4–5	$3–3.50	$6–7 (*twin beds* $7–8)	$4–6	11 blocks
The Shoreham, 15th and H Sts.	$5–7	$3.00	$6–10	$5.00	7 blocks
The Ebbett, 14th and F Sts.	$3.50	$2.50	$6.00	$4–5	5 blocks
The Richmond, 17th and H Sts.	$3.50	$2.50–3	$5.25–6	$3.75–4.50	10 blocks
The Harrington, 11th and E Sts.	$3.50–4	$3.00	$5–7	$4.00	3 blocks
Grace Dodge for Women, North Capitol and E Sts. *showers* (No tipping)	$3.00–3.50	....	$5.50	$4–5	11 blocks
Congress Hall, N. J. Ave. bet. B & C Sts., S.E.	$3–3.50–2.50	....	$5–6	$4.00	14 blocks
Burlington Hotel†, 1120 Vermont Avenue, N.W.	$3.50–4	$2.00–3	$4–6	$3–5	10 blocks

* Every room having private bath with shower tub and running ice water.
† Special rates quoted for this meeting.

Section Chairmen for Annual Meeting

Chairmen for the Eighteenth Annual Meeting of the National Tuberculosis Association to be held in Washington, D. C., May 4, 5 and 6, have been appointed by the Board of Directors as follows:

Clinical Section—Dr. Charles R. Austrian, Johns Hopkins Hospital, Baltimore, Md.

Pathological Section—Dr. Charles Krumwiede, Department of Research Laboratories of the New York City Board of Health, New York City.

Advisory Council—Dr. William F. Snow, General Director American Social Hygiene Association, New York City.

Sociological Section—Walter S. Ufford, Executive Secretary, Washington Tuberculosis Association, Washington, D. C.

Nursing Section—Miss Anna M. Drake, R. N., Director of Public Health Nursing, State Board of Health, Des Moines, Ia.

Reduced Transportation

An effort is being made to secure reduced rates for those attending the Annual Meeting, on the certificate plan. A fuller announcement will be published in the April BULLETIN. Before purchasing tickets, members are asked to communicate with the National Association regarding reduced rates.

Public Health in the Special Session of Congress

The special session of the Sixty-seventh Congress, which convened on April 11, 1921, and adjourned on November 23, 1921, had before it 143 bills concerned with some phase of public health. Of this number only six passed both houses of Congress and became laws. These laws included the Sheppard-Towner act for the promotion of the welfare of maternity and infancy, the Willis-Campbell anti-beer legislation, a general deficiency bill in which provision is made for the continuance of the Interdepartmental Social Hygiene Board, the creation of a Veterans' Bureau, and two minor measures, one allowing the Cincinnati post office to use a special cancellation stamp for the Health Exposition held there in October, and a bill providing for the distribution of surplus army tobacco to ex-service patients in hospitals. During the approximately six months that the special session was at work about 10,000 bills and resolutions were introduced in

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Relation of the Public Health Nurse to Tuberculosis Nursing

The following is an abstract from an address delivered by Miss Stella Fuller, A. R. C., Atlanta, Ga., at the recent meeting of the Mississippi Valley Conference on Tuberculosis. Before joining the staff of the American Red Cross, Miss Fuller was with the Wisconsin Anti-Tuberculosis Association.

The aim of the public health nurse is to assure curative, preventive and educational facilities along health lines. Her duties are to educate the public through the various services she renders as a public health nurse so that they may know how to obtain and maintain better health. Her duties along this line of cure mean the care of those whose defenses have failed and who have become ill. In prevention she teaches how to guard those defenses. These methods are identical with those of all tuberculosis workers. They, too, emphasize care, prevention and education.

If the public health nurse has this in mind, her prenatal work will not merely mean prenatal hygiene but will mean that a child will be brought into the world safeguarded from tuberculosis and therefore from other infections.

If the Infant Welfare Nurse has the tuberculosis work ever before her she will teach breast-feeding or properly modified milk, not merely to carry the child through the infant period but to make him more resistant to tuberculosis and other infections.

The school nurse, if she sees her full opportunity, will have each child weighed and measured and inspected for physical defects, not merely for the school period, but in order that he may develop the best possible physical condition through the years when he is most susceptible to tuberculosis. There is possibly not a schoolroom in this state which does not house one or more children who need careful and special care if they are to be brought through their school days without a tuberculous infection. Every public health nurse should have this in mind and file the names of children whom she feels she should watch. The nutrition clinics, which have been promoted so successfully during the past year, are a great help in seeking out these little children and checking up on their general condition.

The following suggestions may be helpful to the public health nurse who really wants to do her part in the great educational scheme which has reached such magnificent proportions and such gratifying results:

1. Have on file all the pamphlets the national and state tuberculosis association will give you with the JOURNAL OF THE OUTDOOR LIFE and the BULLETIN issued by the National Tuberculosis Association.

2. Read the *Public Health Nurse* and keep your copies for future reference.

3. Encourage the Modern Health Crusade in the schools.

4. Have a set of tuberculosis charts for use in your office and throughout your territory.

5. Distribute tuberculosis literature.

6. Help the seal sale by buying seals yourself and encouraging others to buy.

7. Study the death records at the city hall and the county court house and ask for records from the state capitol of all deaths in your territory.

8. Make up a spot-map showing where these deaths have occurred.

9. With the cooperation and approval of the local health authorities visit these homes with the idea of looking up all contacts. (Bearing in mind that for every death from tuberculosis there are at least five active cases in the community.)

10. Point out the need whenever the opportunity is given you for open air schools, nutrition clinics or hot lunches, adequate playgrounds, sanatoria, dispensaries, and more public health nurses.

11. Visit every sanatorium and clinic in your county and know the workers.

12. Keep a monthly account of all tuberculosis work done, whether required to do so or not.

13. Read the laws and regulations which refer to tuberculosis in your town, county and state.

14. Give assistance to the observance of tuberculosis Sunday when it is held in your community.

15. If you are submitting material for local papers do not forget to include tuberculosis information. If there is a sanatorium in the community a regular news letter may be provided by the superintendent. This has been done without mentioning names of patients.

16. See that you have prophylactic supplies which may be given to patients. Wear a wash uniform, without which it is difficult to give bedside care.

17. Know the name and address of every tuberculous ex-service man in your territory and give him every assistance in your power.

18. Secure information from the state board of health of any facilities offered in your territory for periodic examinations or clinics, and assist as requested by local medical society or doctor.

Campaign Service

The Campaign Service of the National Tuberculosis Association is now a separate department of the work of the national organization, its connection with the publicity department having been severed. Mr. Basil G. Eaves is Campaign Secretary as heretofore.

Illinois Combats "State Medicine" Objection

The Illinois Tuberculosis Association is distributing a pamphlet dealing with the tuberculosis clinic as it is conducted by the Association. In view of the fact that many physicians in the state are more or less antagonistic to what is termed "state medicine," the Illinois Tuberculosis Association explains in detail the purpose of its clinics.

"The clinics are diagnostic clinics. They have nothing to do with the treatment of patients. They are held only in conjunction with the county medical society or the local medical profession. The individual local physicians are invited to bring their own patients to the clinics or to express their approval of their patients being invited to the clinics. The clinics are held chiefly with the medical profession, for the medical profession and by the medical profession.

"Nurses and others arranging clinics are particularly urged not to present patients for examination except with the approval or in the presence of the patient's family physician. When the family physician is unable, for any reason, to attend the clinic where his patient is examined, the nurse is expected to convey to the family physician the diagnosis and suggestions made by the clinician. The case records and graphic charts are left in the community and should be available to the patient's physician at all times."

Clinics in Maryland

The earliest efforts of the Maryland Tuberculosis Association, looking toward examination of tuberculous patients in rural districts, was in 1912, when the Maryland Association secured and equipped a tuberculosis railroad coach and sent it over the state, holding meetings and opening the car for exhibition purposes and distribution of literature wherever a stop was made. The railroads in the state carried the car free of charge.

In 1916 the Association secured a Ford truck, which was sent to tour the state with an exhibit, motion pictures, literature, and a lecturer. This was followed by the employment of a physician for a four months' period, who held clinics in various counties in cooperation with local physicians and their patients. This work was not followed up, but was only valuable for its instructive side to the local physicians.

In 1920 our Association employed a tuberculosis specialist for county work. First, contacts with counties were made through letters, and engagements were made with county medical associations to devote a part of their regular meeting, or call a special meeting, for the showing of the Government tuberculosis films and a lecture on diagnosis of tuberculosis. Wherever opportunity offered, these contacts were followed by clinics.

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Modern Health Crusade
DEPARTMENT

Health Clubs and the Modern Health Crusade

The Club idea in connection with the Modern Health Crusade has developed in various ways in different sections of the country. In Oregon a plan has been worked out by the public health nurse which has proved very successful. After presenting the Crusade to the teachers and children and winning their enthusiasm for the work, the nurse tells them that in addition to the Crusade work, many schools have health officers. An impressive badge to be worn by this official is shown to the children and an explanation is given about sheriffs and other officers of the law who are entitled to wear certain badges. The school health officer, the nurse explains, is appointed by the teacher to serve a certain period of time. While he wears his badge, he is responsible for the general appearance of the school, grounds, and so on. If any one breaks a rule and is reproved by the health officer he must take it in good spirit, because he may be the officer next week and would want the same respect shown to him. The health officer makes a daily inspection of the children in school. He goes up and down the aisles and notices the hands, face, neck and ears, and shoes. This checks up on the health chores for the children and relieves the teacher. It gives the responsibility to the children themselves, which is wholesome discipline and makes the keeping of the chores more impressive.

In a school in Colorado, the titles of "health officer" and "school nurse" are given to the best Crusaders and their authority is indicated by attractive brassards which they wear on their sleeves. In another school in the same state, following the teacher's story of Lord Chesterfield, that high exponent of courtesy and gentleness, the boy and girl Crusaders having the best records are known as Lord and Lady Chesterfield. Their duties are to inspect the other children in the morning and check up their chore cards. In several Denver schools the teachers appoint, or the children elect, one or two health officers for each room. These officers wear arm bands bearing the double-barred cross and the letters "H. C." The officers collect the chore cards, inspect the children daily and report to the teachers. They are also responsible for keeping the school grounds in order and several principals have reported that the grounds have never been in such good condition and that the self-government policy carried out by the health officers greatly lightens the work of the teachers.

In Texas Mrs. Pearl Hyer Hazel, Children's Secretary of the Texas Public Health Association, calls her classroom crusade leaders "mayors." The "mayors" write frequent letters to Mrs. Hazel telling of the progress their classes are making. The following excerpt from one of these letters indicates how seriously the "mayors" take their responsibility. "We have had nine dirty children the past week, but we certainly made them stay in and clean up. There are 3,212 checks for the past week, an average of 70 for each child. There could have been a higher average but we have students out of school with diphtheria and scarlet fever."

In Virginia and Kansas the Board of Health type of club has been developed with much success.

In Donora, Pa., a League of Modern Health Crusaders has been formed with constitution and by-laws—under the auspices of the Civic Committee of the Donora Woman's Club.

The National Association favors the health club idea as a supplement to the Health Crusade wherever the time and willingness of teachers and pupils permit. Training children in organization cannot be left entirely to parents or agencies outside of school, as they fail to function for a large group of children. The schools must contribute to this training, since they reach the largest number of children and are best positioned and equipped in personnel for the work. The chief difficulty with the club idea is the amount of detail necessary to insure its success. On the other hand the more thoroughly the organization operates, the better drill the children will receive to prepare them for their civic responsibilities later on. The Modern Health Crusade, because it requires little or no organizing into local units, lends itself to a wider range of school grades and appeals to more teachers than the local organizations which require officers. The systematic performance and recording of the health chores is all that is required to become a Crusader, but membership is in a national movement, that draws members by its romance and insignia and coheres through a standardized minimum program.

The value of home cooperation and interest in the health education of the

CHILDREN FROM THE STEELE SCHOOL IN HARRISBURG, PA., WHO APPEARED IN THE HEALTH PLAYLET, "SEVEN KEYS," GIVEN JANUARY 24TH, AT HARRISBURG, IN CONNECTION WITH THE STATE-WIDE TUBERCULOSIS CONFERENCE HELD UNDER THE AUSPICES OF THE PENNSYLVANIA TUBERCULOSIS SOCIETY.

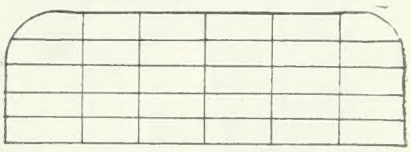
child is most important, as all health workers agree. It is here that the Crusade is particularly strong. The keeping of the chore records requires the attention of the parent as well as of the teacher, and the child has in this way a double check on the performance of his "health chores." Health clubs in schools can very well supplement the work of the Crusade, and in such capacity are highly recommended, but they cannot be substituted for the Crusade and get the same result, for they lack the home supervision.

For those interested in organizing health clubs, a constitution and by-laws, standard for such organizations, are given in the Modern Health Crusade manual on page 26.

Health Games

Two new health games are offered by the Massachusetts Tuberculosis League —the rainbow game, and the college race.

For the rainbow game, draw on the blackboard a diagram like this:



Let the spaces up and down represent different colors to be chosen by the competing rows. Be sure that colors are chosen which will make an agreeable blend. The horizontal spaces will represent the number of weeks set apart for the competition—preferably five—to coincide with the five-week period necessary for an award in the Modern Health Crusade. At the end of each week fill in the colors for all the rows in which every pupil has done at least 54 of the Modern Health Crusade chores. Any row which fails to earn its color will naturally spoil the rainbow for the entire room and a tremendous amount of pressure will, therefore, be brought to bear upon that row, or upon careless individuals, by the other pupils in the room.

For the college race, let the pupils in each row select the name of a favorite college—Yale, Harvard, Princeton, Wellesley, Smith, etc. Wherever there are girls and boys in the same room it will be necessary, of course, to have them in separate rows for the purpose of playing this game and arranging competition. Put on the blackboard the names of the several colleges chosen and attach thereto the scores in number of points won at the end of each week. After the first week it will be an advantage to indicate the total number of points won in order that the pupils may see from week to week just who is leading in the race. Young boys and girls are great admirers of some colleges and their records, especially athletic records, and this plan of letting them imagine that they are representing one of our best-known institutions will greatly serve to stimulate their interest in winning points for the respective teams along health-work lines.

Crusade Field Work for National Association

Miss M. Grace Osborne, Assistant Crusader Executive of the National Association, left New York on October 9 for the purpose of making a field tour in connection with the work of the Crusade. She stopped in Harrisburg, Pa., to speak at the County Teachers' Institute on the practical application of the Crusade to the schools, using for the several hundred teachers there both posters and other visual forms of health education, and having for a demonstration class a group of seventeen seventh-grade pupils from Harrisburg schools.

In spite of the fact that the pupils felt the presence of the large adult group, they responded closely to the lesson and enthusiastically helped to work out the local and personal health problems of the lesson through Crusade mediums.

On October 12-14 the Indiana Association was visited for consultation, with a view to following up the opening already gained through the inclusion of the Crusade in the Course of Study for Indiana. In Illinois, on October 15 and 16, a Crusade Institute was held at the University of Illinois as a part of the annual state Community Conference, together with the annual meeting of the Illinois Tuberculosis Association. In addition to the institute, where about fifty pupils were enrolled, an address was given at the mass meeting in the evening.

In North Dakota, from October 17 to November 21, a series of divisional and county Teachers' Institutes was visited and instructed in practical teaching of health. This instruction was aimed at the youngest and least prepared teachers, methods and actual lessons being given. North Dakota, under the active leadership of its superintendent of education, expects to inaugurate a health course which will make practice methods its basis and require the improvement of each pupil physically and in health habits if a passing grade is to be given. This will do much to provide the necessary follow-up for the nursing and clinical service now given. This, so far, has seemed impossible of accomplishment because no real requirements of a hygienic or physical nature have been made by the school authorities. North Dakota expects to use this practice method as a requirement of her schools for all grades next year.

In South Dakota one talk was made to the Rural Teachers' Section of the state teachers' meeting and another to the County Superintendents' Section. Following this, a schedule was made by which most of the State Normals were visited, together with several of the school superintendents of the larger cities.

In Illinois, on December 8, 9 and 10, McClean County held an Institute in which health was the topic. Among the speakers were Dr. W. A. Evans, of Chicago, and Major John L. Griffith, Director of Physical Training and Athletics for Illinois University. Most of the program for one day was given over to an explanation of the Crusade and its practical use in the schools. Two health plays were given and a carefully prepared health exhibit, gathered from various state and national health and educational departments and associations, occupied the main hall. Conducted tours of this exhibit were a part of the program. Following this institute, Miss Osborne talked before the Annual Banquet of Girl Scouts at Champaign, at which there were 250 guests. The state Normal Universities were addressed at Assembly at Bloomington, Charleston and Carbondale on dates following.

County or sectional meetings for instruction in Crusade methods were included in the itinerary. Several thousand teachers were instructed. The plan followed was to demonstrate health teaching as an essential method.

Health Leaflets for School Children

The Canadian Association for the Prevention of Tuberculosis, Bank Street Chambers, Ottawa, is distributing an attractive four-page leaflet printed in two colors for the use of school children. The following are extracts from the leaflet, which is worded in language that almost any school child can understand.

"Hold up your head. Sit up straight. Walk erect. Take in deep breaths and always breathe through your nose.

"Exercise builds up your muscles, so take plenty of it out of doors every day. Out-of-door games are good for both girls and boys, but always rest before becoming overtired.

"Let the fresh air into your bedroom every night by opening the window at the top and at the bottom. See that your bed is out of a draft, and if you are well covered, you will sleep all the better for having fresh air in your room."

Committee of Three Meets

A meeting of the Committee of Three on the Health Crusade—Mrs. E. R. Grant of Washington, D. C., Mr. T. J. Edmonds of Iowa, and Mr. J. P. Faulkner of Georgia, chairman—was held in New York City at the offices of the National Tuberculosis Association, January 16th-19th. Dr. Hatfield, Mr. De Forest, Miss Osborne and Miss Strachan of the National Association, attended the sessions of the Committee. A set of graded chores, covering a four-year school period from grade 3 through grade 6 was drafted. A second meeting of this Committee will be held in Chicago February 27th at the time of the convention of the Department of Superintendence of the National Education Association. On the following day a conference of the National Advisory Council on the Crusade will be held. The two new members of the Council are Dr. P. E. McClenahan, Superintendent of Public Instruction in Iowa, and Dr. Eugene Kelley, State Commissioner of Health in Massachusetts.

The Petersburg Demonstration

By Irving Lewis Spear

Executive Secretary Virginia Tuberculosis Association

Petersburg, a city of 31,367 is situated on the Appomattox River, eighty miles northwest of Norfolk, Va. Here 17,618 white people maintain a delightful Anglo-saxon culture, yet live with and peaceably leaven 13,749 colored folk. During the week of September fifth to ninth (1921), inclusive, the Virginia State Board of Health, the Petersburg Health Department, the Metropolitan Life Insurance Company and the Virginia Tuberculosis Association focused their energies on a health demonstration in the form of a tuberculosis clinic. The people of Petersburg supplemented this concerted effort by a cooperative impetus, without which the work would have been a failure. There was one object, and only one, in holding the clinic. We hoped to create enough enthusiasm to put the work on a permanent basis.

Our initial move was to approach prominent men and women of affairs, not least among this group being the city manager. Here, in conference, we told them plainly and thoroughly our plan. It met with unusual approval at the very outset, and this spirit continued to manifest itself and grow as the city added its popular momentum to the cause. The city council agreed to bear one-half of the expense incident to the demonstration.

Our second move was to visit the local doctors. By "smoking a friendly pipe" with each one for half an hour we were able to overcome any obstacles of uncertainty which may have been lurking in their minds and to win for ourselves that particular support which is absolutely indispensable to a successful health program. Thoroughly informed, as they should always be, when foreign influence of such a nature is brought to bear, they not only met in common conference at the health center (The Petersburg Health Department) to discuss the situation, but pledged their loyal support to the cause. A local X-ray specialist tendered the use of his equipment, as well as his time, "without money and without price." Throughout the entire period of the demonstration the local doctors were in constant attendance.

Without exception, the unique feature of the work was an evening session devoted to clinical discussion. A few selected cases of signal importance were presented to the local doctors for conhad been examined at the clinic earlier sideration. The individuals in question in the week, and the salient features of their tuberculosis pathology were now carefully analyzed and explained by our clinicians.

Publicity

At least one scholar has said that we learn to read Latin by reading it. Naive as the assertion may appear, it figuratively applies to the subject of clinic publicity. The ability to awaken the popular mind to the essence of some vital issue such as this comes through practice. The object of this educational propaganda is always clear in concept. The means at our disposal are often subject to local conditions. Failure is apt to follow if we adhere to stereotyped rules. What apparently worked in Petersburg might not be successful if tried elsewhere, and vice versa. For the clinic in question, the publicity was commenced fully six weeks in advance. Beginning gradually, yet methodically, with a definite program mapped out at the start publicity was stressed with added emphasis each day. Its climax was only reached when the demonstration was over and the newspapers gave their attention to blazing headlines of a different nature.

Having first gained permission, a banner nine by twenty-five feet was stretched across a street in the main business section of the city. On either side appeared the following:

Free Chest Examinations Will be Given by the State Board of Health and the Virginia Tuberculosis Ass'n

Watch for the Announcement

This Work is Made Possible by the Sale of Christmas Seals

This at once awakened a popular curiosity. Twenty-four hours after being placed in position, the banner accidentally caught on fire due to contact with a street car trolley and was completely destroyed. One identical to the first was soon in its place, however, and the traction company soothed our perturbed souls by allowing free advertising space in every car in Petersburg. Thus, our loss was gain through added publicity.

Whatever valid arguments there may be against the city manager form of government, we must at least concede its effectiveness in tuberculosis work when the manager chances to be an advocate for better health. Mr. Louis Brownlow, city manager of Petersburg got things done. He cleared away the underbrush of petty city politics which would have been sufficient to seriously hamper our efforts. His advice and help were ever present. His daily newspaper articles, were a continued impetus to a finally awakened municipal consciousness.

Personal Contact

Our next attack in the way of publicity was a complete canvass of the city by four nurses, including the Metropolitan nurse. Every home in which there had been a death from tuberculosis during the past five years, or where there was a recorded active case, was visited. To facilitate the work, automobiles were placed at their disposal by the Petersburg Rotary Club. Nothing is so valuable in clinic work as personal contact between patient and nurse. It overcomes prejudice and fear. It instills optimism, confidence and truth in the hearts of the afflicted and the ignorant. It is excellent publicity. Of the total number of active cases unearthed at the demonstration, two out of every three were from this contact class.

Lack of space prohibits further detailed description of the various means employed to bring the demonstration to the attention of the publics. Briefly, however, the following devices were used. Lecture work was instituted in all factories and department stores of appreciable size. Slides were placed in all moving-picture houses. The police department distributed from house to house seventy-five hundred leaflets which announced the dates, hours and location of the clinic. Printed thereon appeared also the symptoms of the disease. The first three days of the week were given to the examination of the white people; the last three days to the colored people. The Retail Merchants Association sent a personal letter of announcement to every merchant in the city. The Sunday preceding the clinic each minister urged the worthiness of the cause and exhorted personal attendance by each member of the congregation. One minister, an arrested case himself, preached a sermon on the disease. Several of the profession were examined as an incentive and example to their followers. On this particular Sunday literature was placed in every church pew throughout the city. By every available medium we endeavored to popularize the movement.

Permanent Results

A clinic in which the examiners are forced to do hurried work is ineffective, unscientific and creates popular antipathy. Plenty of time and attention was given to each applicant for examination. Courtesy was shown each case from the welcome at the door to the farewell at departure. We tried to stress the personal equation at all times.

As previously stated, our object in instituting the work was to create sufficient momentum to place the clinic on a permanent basis. Herein we were successful. Under the direct supervision of the local health department from thirty to forty cases now present themselves for examination each week. Follow-up work, that vital element to a successful clinic, is under the direct care of the local tuberculosis nurse. By courtesy of the King's Daughters, plans are in progress for extensive clinic equipment, including X-ray outfit.

The Seal sale reports just received show that Petersburg has doubled the amount of money it raised in 1920. Seventy-five per cent. of the gross proceeds are retained locally as is the case in every section of the state where the work is on such a basis. Thus do we hope to build a structure which shall effectively challenge the onslaught of the foe.

The Cayuga Preventorium

(*Continued from page 22*)

house, books, puzzles, all find use. Even old railway ties and a board pile make wonderful huts and dens. Rabbits and the ducks are a never-ceasing wonder and charm.

The table is of the plainest and best, with emphasis placed upon an abundance of cereals, fruits and vegetables; fresh milk and eggs and, of course, an occasional ice cream. And we make sure that the youngsters have enough sweets.

Our children turn to bronze, in bathing-suits and rompers; and in fact after a few weeks they wear but little else. They gain from four to sixteen pounds in the two months. They are supervised throughout whether in play, song, dance or story; and when they return to town in September "a livelier, rosier and sweeter group of children could scarcely be found."

Finance

A word as to finance. About a quarter of the cost is financed through Christmas seals. All the rest is furnished "the Kiddies" through mail canvas, or drive, among their friends—the people of this community and county. Getting funds for the Preventorium is the easiest thing we do. Getting equipment, toys, records for the phonograph, furnishings, clothing, entertainment, food even, is easy. Seemingly every one of our citizens, young or old, is "ready to help the Kiddies."

Our overhead costs may be in theory high; but our results are good, and each year gaining. Meanwhile we are building up what Dr. Krause is pleased to call "a corps of able and enthusiastic teachers";—both adults and children, to say nothing of our physicians and nurses, and our community. Sir Arthur Newsholme has called attention to the infection by tuberculosis in the early years of life, from five to fifteen. They formerly had little or no care at these ages; the preventorium, the open-air school and particularly the clinic furnishes this care.

A few years ago we allowed some "temperatures" to be included in our summer list for the preventorium. Before the year was over five of these youngsters had been sent to the County Sanatorium. Since that year we have carefully regulated the selection to the pretuberculous. The ages are six to fifteen or sixteen years, boys and girls in about equal proportion. These preventorium youngsters, about 25 in number, follow on through the year, many of them in the open-air school; all of them throughout the year at the clinic; and they all clamor to be included in the summer list. And now to the proof of the pudding, some of these children have reacted to temperature in the past and have quickly recovered; so that *we have not now an active T. B. among any of these children; nor have we had a death* in this ten years of experience. Our experience covers some 150 children. The cost for ten years has been less than $15,000, plus the cost of our building; or a net amount of considerably less than $25,000. Has this community any other investment that has cost so little and has paid so well? We think not. And every child and each parent is an enthusiastic, if not an able teacher. And it is all eminently and excellently educational.

Clinics in Maryland

(*Continued from page 24*)

Some eight of the twenty-three counties were thus organized, with more-or-less permanent clinics, our physician attending the clincs until the local physicians were able to take over this work. The local nurse followed up the work. While our physician was holding the clinic, the local physicians would bring private patients, and the nurse would also have her patients, for examination. The number of examinations was not large and the work was chiefly valuable for its educational side. In one county, however, our physician made chest examinations of all school children, in cooperation with local school and health authorities. This work was interrupted by the resignation of our physician to take the superintendency of Eudowood Sanatorium.

Cooperation With Physicians

After a lapse of some six months, we took a physician upon our staff, who was under the Veteran's Bureau for Rehabilitation training. As he had had considerable tuberculosis experience and was a graduate physician, this enabled us to again take up this work, and up until the beginning of this year, or for a period of about eight months, at no expense to this organization. He is now regularly employed upon our staff, and we are making definite plans for going ahead with the county work. His present method of work will be rather to organize a one or two days' tuberculosis conferences in the counties, at which time some of our best tuberculosis experts would be present to lead discussions and hold demonstration clinics. We believe that we can make more rapid and substantial progress by working chiefly with the physicians, especially in view of our limited funds to devote to this purpose. Some good tuberculosis men are being developed in the counties, and will be able to be of more service to their own locality. We are counting upon the local nurse to follow up and cooperate with these educational meetings.

It is too early to tell much about this plan, as it is just being put into operation. Our publicity department will use all news items connected with this work for publicity. As soon as it is possible to establish a new clinic, and secure the services of a good tuberculosis man, every effort will be made to do so. Our physician will in some cases do some examination work, but his work will be more organizational and educational. This work is closely tied up with other work which will be carried on in the counties simultaneously.

A. E. Sinks,
Executive Secretary, Maryland Tuberculosis Association.

Public Health in the Special Session of Congress

(*Continued from page 23*)

the House and about 3,000 in the Senate. Only about 1 per cent. of this number was concerned with public health.

This information comes from the National Health Council, the Washington office of which issues bi-weekly bulletins on national health legislation. During the special session sixteen of these legislative statements were published. All health bills before Congress were summarized in them in an impartial manner. Although intended at first only for members of the Council, the reports have been of such widespread interest and value to health workers that they are now distributed to all who desire them at cost price.

Further information concerning these publications may be obtained from Mr. James A. Tobey, Washington representative of the National Health Council, 411 Eighteenth Street, N. W., Washington, D. C., or from Dr. D. B. Armstrong, executive officer of the National Health Council, 370 Seventh Avenue, New York.

Ohio Course Incorporates Crusade

The Course of Study in Hygiene just issued by the Ohio State Department of Education, is an important addition to the growing list of books brought out by state departments incorporating the Health Crusade in their instructions to teachers. It was prepared under the direction of Vernon M. Riegel, Superintendent of Public Instruction in the Ohio State Department of Education, by Miss Virginia Lewis, Crusade Director of the Ohio Public Health Association. The Crusade system is the foundation upon which the "course" has been built, and the Crusade work runs like a skein through the whole book. A series of syllabi of lessons for the use of teachers throughout the eight school grades is also included. The central feature of the book is the actual performance of the health chores in each grade, and instruction in hygiene is coordinated with the practice of the chores.

For the upper grades the program of the Crusade Round Table is set forth as a practical means of developing the physical fitness of the pupils.

Health associations and school superintendents interested in developing similar courses in the study of hygiene should apply to the Ohio Public Health Association, 83 South Fourth Street, Columbus, Ohio, for copies of this manual.

Directors' Weekly News Letter

A confidential letter sent to each member of the Board of Directors of the St. Louis Tuberculosis Society every week keeps each of the forty members of the Board in close touch with details so that when the board and various committees meet all members can give instructive criticism and advice for the operation of the Society.